

#3

Please type a plus sign (+) inside this box → **+**

PTO/SB/01 (12-97)
Approved for use through 9/30/00. OMB 0651-0032
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.



DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)	Attorney Docket Number	DOWD 3-3
	First Named Inventor	PATRICK W. DOWD
	COMPLETE IF KNOWN	
	Application Number	09 / 287,654
	Filing Date	04-07-1999
	Group Art Unit	
Examiner Name		

☐ Declaration Submitted with Initial Filing OR ☒ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

FIREWALL FOR PROCESSING A CONNECTIONLESS NETWORK PACKET

the specification of which (Title of the Invention)

☐ is attached hereto
OR
☒ was filed on (MM/DD/YYYY) **04/07/1999** as United States Application Number or PCT International

Application Number _____ and was amended on (MM/DD/YYYY) _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)

☐ Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this box → ☐

PTO/SB/01 (12-97)
Approved for use through 9/30/00. OMB 0651-0032
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.



DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
60/095,647	08/07/1998	

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☐ Customer Number OR

☒ Registered practitioner(s) name/registration number listed below

Place Customer Number Bar Code Label here

Name	Registration Number	Name	Registration Number
ROBERT D. MORELL	37,398		
THOMAS O. MASER	26,768		
STEPHEN M. BLOOR	39,612		

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☐ Customer Number or Bar Code Label

OR ☒ Correspondence address below

Name	ATTN: PATENT COUNSEL, GC				
Address	NATIONAL SECURITY AGENCY				
Address	9800 SAUSAGE ROAD STE 6542				
City	FT. MEADE	State	MD	ZIP	20755-6542
Country	USA	Telephone	301-688-0287	Fax	301-688-0076

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))		Family Name or Surname	
JOHN T.		MCHENRY	
Inventor's Signature	<i>John S. McHenry</i>		Date
Residence: City	ODENTON	State	MD
		Country	USA
Post Office Address	911 SKYHILL LANE		
Post Office Address			
City	ODENTON	State	MD
		ZIP	21113
		Country	USA

☐ Additional inventors are being named on the supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

#4

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

STATEMENT UNDER 37 CFR 3.73(b)

Applicant/Patent Owner: PATRICK W. DOWD, JOHN T. McHENRY

Application No./Patent No.: 09/287,654 Filed/Issue Date: 04-07-1999

Entitled: FIREWALL FOR PROCESSING A CONNECTIONLESS NETWORK PACKET

NATIONAL SECURITY AGENCY a U.S. GOVERNMENT AGENCY

(Name of Assignee)

(Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

States that it is:

1. ☒ the assignee of the entire right, title, and interest; or
2. ☐ an assignee of an undivided part interest

in the patent application/patent identified above by virtue of either:

A. ☐ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.

OR

B. ☐ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

1. From: _____ To: _____
The document was recorded in the Patent and Trademark Office at
Reel _____, Frame _____, or for which a copy thereof is attached.
2. From: _____ To: _____
The document was recorded in the Patent and Trademark Office at
Reel _____, Frame _____, or for which a copy thereof is attached.
3. From: _____ To: _____
The document was recorded in the Patent and Trademark Office at
Reel _____, Frame _____, or for which a copy thereof is attached.

☐ Additional documents in the chain of title are listed on a supplemental sheet.

☒ Copies of assignments or other documents in the chain of title are attached.

[NOTE]: A separate copy (i.e., the original assignment document or a true copy of the original document) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the PTO. See MPEP 302-302.8]

The undersigned (whose title is supplied below) is empowered to sign this statement on behalf of the assignee.

4-9-1999

Date

Robert D. Morelli

Signature

ROBERT D. MORELLI

Typed or printed name

PATENT COUNSEL

Title

ASSIGNMENT

(Government Employee)

TITLE OF INVENTION:

FIREWALL FOR PROCESSING CONNECTIONLESS NETWORK DATA PACKETS

INVENTORS:

PATRICK W. DOWD, JOHN T. MCHENRY

We, the undersigned inventors, in consideration of the rights of the Government of the United States acquired by virtue of the circumstances under which the above-identified invention was made, hereby:

1. Assign to the Government of the United States, as represented by the Director, National Security Agency, the entire right, title, and interest throughout the world in and to the above-entitled invention and application for patent and all Letters Patent issuing thereon, and any continuation, continuation-in-part or division of said application and any reissue or extension of said Letters Patent.

2. Agree to provide any further information within our knowledge and to execute any further documents necessary to the prosecution of patent applications on the invention, the prosecution and settlement of the interferences and recording of title to patent applications and patents.

INVENTOR: JOHN T. MCHENRY

ADDRESS: (City) 211 SKYHILL LANE (County) ANNE ARUNDEL
ODENTON

(State) MARYLAND

DATE: APRIL 2 1999

SIGNATURE:

John T. McHenry

INVENTOR:

Patrick W. Dowd

ADDRESS:

(City)

Glenburg

(County)

Howard

(State)

MD

DATE:

9 April 1999

SIGNATURE:

[Handwritten Signature]

State of

MARYLAND

County of

On 9 April 1999 (date), known to me to be the individuals described in and who executed the foregoing instrument duly appeared before me and acknowledged to me that they executed the same as their own free act and deed.

(Signature)

[Handwritten Signature]

(SEAL)

Notary Public of

M. ETHELYN WIGHTMAN
NOTARY PUBLIC STATE OF MARYLAND
My Commission Expires July 29, 2002

My Commission Expires